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## \*BIBDATASHEET\*

CONFIRMATION NO. 6492

Bib Data Sheet

<b>SERIAL NUMBER</b> 10/773,540	<b>FILING OR 371(c) DATE</b> 02/06/2004 <b>RULE</b>	<b>CLASS</b> 604	<b>GROUP ART UNIT</b> 3763	<b>ATTORNEY DOCKET NO.</b>	
<b>APPLICANTS</b> Vincent L. Vaillancourt, Livingston, NJ, Deceased; Patricia Vaillancourt, Livingston, NJ, Legal Representative;					
<b>** CONTINUING DATA *****</b> This application is a DIV of 10/116,776 04/04/2002 PAT 6,761,706 which claims benefit of 60/280,991 04/04/2001					
<b>** FOREIGN APPLICATIONS *****</b>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 05/10/2004					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		<b>STATE OR COUNTRY</b> NJ	<b>SHEETS DRAWING</b> 6	<b>TOTAL CLAIMS</b> 3	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> 27192					
<b>TITLE</b> NEEDLE GUARD					
<b>FILING FEE RECEIVED</b> 685	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		